

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKRECEIVED
SDNY PRO SE OFFICE

2016 APR -5 AM 9:54

Robert Derek Lurch Jr.

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Bellevue Hospital Center

COMPLAINT

under the

Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)Jury Trial: ☒ Yes ☐ No

(check one)

16CV2517

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Robert Derek Lurch Jr.
 ID # 3491503637
 Current Institution GRVC
 Address 09-09 Hazen St. East Elmhurst, NY 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name MD France Chaput Shield # _____
 Where Currently Employed Bellevue Hospital Center
 Address 462 First Avenue
New York, NY 10016

Defendant No. 2 Name RN Maria D Marquez Shield # _____
Where Currently Employed Bellevue Hospital Center
Address 462 First Avenue
New York, NY 10016

Defendant No. 3 Name _____ Shield # _____
Where Currently Employed _____
Address _____

Defendant No. 4 Name _____ Shield # _____
Where Currently Employed _____
Address _____

Defendant No. 5 Name _____ Shield # _____
Where Currently Employed _____
Address _____

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?
Bellevue Hospital Center

B. Where in the institution did the events giving rise to your claim(s) occur?
Location: Emergency

C. What date and approximate time did the events giving rise to your claim(s) occur?
Dec 26 2013 at 7:12 PM

D. Facts: _____

What
happened
to you?

Who did
what?

--- See Attached ---

Was
anyone
else
involved?

Who else
saw what
happened?

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. _____

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes _____ No ☒

What

happened:

Date:

3/25/2016

ON Dec 26, 2013 I had just moved to New York the day before on Christmas day. I had a few drinks at a friend's birthday party and went to go grab a bite to eat so I went drink on a empty stomach. I went to a Chinese restaurant on the corner of West 24th Street on Ninth Avenue. When I got to the restaurant I ordered a meal that came up to \$6.99 roughly \$7. I handed the cashier a \$20 bill and waited for my meal to be prepared. When my food was done the cashier handed me my meal and tried to hand me three 1 dollar bills with change. I refused the change and took my meal. I then told the cashier you must be confused I handed you a \$20 dollar bill. She started yelling "no no you hand me 10 dollars I call police". I told her that's what you should do because I'm not leaving without my change. When the officers entered they asked me what's the problem? After I explained the situation to them the cashier said "he's lying". So I stated I have nothing to lie about run the camera's back. The officers looked at the cashier and told her she doesn't have to do that. Then they looked at me telling me to leave. I told the officers I'm not leaving run the camera's back I want my change I'm not rich. These cops then got aggressive grabbing their guns looking at me. I told them your going to kill me then kill me but I'm not leaving without my change. I further stated "I've done nothing wrong and I'm being treated unfairly". The officers then knocked my food out of my hand and said what your suicidal grabbing me. After I asked the officers what I'm under arrest for they said nothing. I later found out when the ambulance came I was going to the hospital. When I got to believe the officers told the nurse give him something to calm him down he's acting up. I said miss I'm in your custody now your responsible for me these officers are lying don't listen to them. I then told her I went to a restaurant and they tried to cheat me out my change. The officer stated I didn't pay for my food. I told the nurse that's a lie to receive your food you have to pay and when the officers entered I was complaining about the amount of change the cashier tried to hand me. I told her I'm not arrested in here for complaining about my change and if I didn't

Pay for my food I would've been charged with a crime. Even though I wasn't in custody and guilty of no crime the nurse took the officer's side. She told him I'll give him something to calm him down. When I saw she was clearly siding with the officer I informed her that "whatever you give me don't give me Haldol I'm allergic to it". She laughed and said "How do you know about Haldol?" So I told her I'm allergic to Haldol the last time I was injected with it I almost died do not give it to me. The cop stated "Now your not so tough". So I shook my head in disgust and told the nurse fax for my records I'm from North Carolina. I was involuntarily committed at Holly Hills Hospital and almost died when I was injected. I told her it can kill me do not give it to me. I further stated "How do you think I even know about the drug this not my first time having an evaluation done and I'm allergic." She told me "I think you just don't live what it does but I don't think your allergic to it". She said it like she really didn't believe me. At that point I knew she wasn't going to fax for my records. I immediately started trying to get up from the chair I was handcuffed to, even though my efforts was useless. Then they brought the hospital gurney and I resisted being placed on it. I knew this nurse was going to forcefully administer this sedative I'm allergic to with the help of the hospital staff. They finally got me on the gurney after a couple minutes. They had to have one person on each side of my body grabbing my arms and they had somebody grabbed my feet even though I resisted by kicking. When I finally was secured on the gurney they wheeled me to the back. I seen the nurse preparing a needle and I started twisting, trying to get out of the restraints. She told me calm down you will be sleep in a couple of minutes. All I could think about was my last allergic reaction when I was injected with the drug and I started twisting violently trying to free myself. I didn't want to experience another reaction my last injection of the drug traumatized me. As she got close with the needle I tried to not stay still so she couldn't inject me. She told the staff to "hold him still so I can inject him". I begged her not to give me Haldol. I stated "miss please don't I can die I'm allergic". Then I stated "miss I'm not lying check my records please". Right before she injected me I told her "I could die miss please don't".

as tears started running down my face. The last time I was injected
 my airway started closing up and I had to struggle to keep breathing.
 The staff at Holly Hills Hospital thought I was acting up and watched
 me while they laughed as I almost choked to death. Thankfully
 one of the patients my play friend (a young white male from Durham,
 NC) told the staff "Sir I don't think he's acting he really can't
 breathe." By the time they injected me with something to counter
 the reaction I had been struggling to breathe for like a minute
 and a half. It was the most terrifying experience I ever had except
 for almost drowning to death when I was 6 or 7 years old at
 Sesame Street amusement park in Philadelphia, PA. So when I
 was told I would be given a drug that caused such a severe
 reaction I almost choked to death, I panicked. Of course, I
 was combative with the staff especially after I told the nurse
 the last time I was injected with the sedative I had such a
 bad reaction I almost died. Yet she still deliberately administered
 the sedative after I informed her of my history with the drug. She
 wasn't even the first one to mention the drug. After she told
 the officers she would give me something to calm me down.
 I told her whatever it is don't give me Haldol I'm allergic and
 I told her to request my medical records via fax, so me
 being held down and given a sedative I'm allergic to against
 my will is barbaric. This is medical malpractice for a healthcare
 professional that receives a patient for a psychiatric evaluation
 and the patient informs the medical professional of a known
 drug allergy to a psychiatric medication. Yet the patient gets
 restrained, held down, and this medical professional administers
 the same drug the patient just told this professional their allergic
 to is unheard of. Regardless what an officer recommends he
 can't instruct a medical professional in regards to what medical
 treatment a patient should receive. Because that is not these
 officers field of expertise. These officers don't specialize in medicine
 their job is to enforce the law. If that was the case they would
 be allowed to administer sedatives to uncooperative persons in custody
 or being detained. So when these officers made the decision that the
 person they were dealing with needed medical treatment they

made no error by handing over that person to a medical professional. Because they are not certified to provide medical services, they are not medical professionals. So when a person is handed over to a healthcare professional for treatment they are responsible for the person that is put in their care. So when a patient in the hospital's care informs a nurse of a known drug allergy. That person's claim should be verified or proven to be false before administering the very same drug the patient stated that they was allergic to. Obviously a medical professional knows how fatal it can be to administer a drug that a patient has allergic reactions to. So when the healthcare professional was notified of a known drug allergy and refused to obtain the medical records of the patient before proceeding with any treatment. This healthcare professional provided improper treatment to the patient which is medical malpractice. After I was deliberately provided improper treatment I was sedated and didn't wake up until the next day. I woke up and asked the nurse who was in the room "How did I get here?" She stated you was fighting with the staff and they gave you something to calm you down. So I told her the reason I was combative while I was restrained was before I got on the gurney I informed the nurse I was allergic to Haldol and the nurse told me I will still be injected with the drug. I told her I was allergic to. She then asked me what happens when you're given haldol? I told her my airway closes up and I'm almost choked to death why? She told me you were given haldol but lucky for you no reaction occurred. I asked why would I be given a drug I informed the nurse I was allergic to. She said I don't know but at least you didn't have a reaction to it. I shook my head then said the hospital staff actually held me down forcefully to administer a drug I informed them I was allergic to. I stated "I couldn't die this is unacceptable." I told her I would like to be alone and she told me where the remote was so I can change the tv. Since this incident I've been brought back to this hospital numerous times for psychiatric evaluations. No matter how uncooperative with the police I will be before being admitted I was never aggressive with the

hospital staff except for this incident. Since then they even listed holdol as a known drug allergy. This is usually such a good hospital I don't understand why this nurse that night would ignore me informing her of a known drug allergy, have me relive the fears of being injected with a drug I had a near death experience with, and get the staff to forcefully hold me still so she can administer the sedative as I beg her not to informing her "I'm allergic I can die". I really don't understand why I was subjected to that type of treatment that night their usually such good people, and a great caring hospital. However I could've had a reaction and died. I should've of never forcefully been given a drug (sedative) I informed the nurse I was allergic to.

Signature

Date:

Robert Lurch

3/28/2016

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ____ No ____ Do Not Know ____

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ____ No ____ Do Not Know ____

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ____ No ____

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ____ No ____

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

1. Which claim(s) in this complaint did you grieve? _____

2. What was the result, if any? _____

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. _____

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: _____

2. If you did not file a grievance but informed any officials of your claim, state who you informed, _____

when and how, and their response, if any: _____

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. _____
- _____
- _____
- _____
- _____

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). Since the medical Professionals at Bellevue Hospital Center was fully informed of my prior history of me being allergic to Haldol and disregarded this information using the injection as a form of punishment. This is unacceptable and cruel/unusual punishment. If I inform a healthcare professional of a known drug allergy then that professional should choose an alternative drug to administer if it is even necessary to medicate in the first place. However if a patient informs a nurse of a known drug allergy, the nurse disregards that information, gets patient placed in ankle and wrist restraints, tells staff to forcefully hold patient still while patient twists violently stating "I'm allergic it can kill me please don't" and the nurse ignored the patient cries while administering the drug. Then the patient received medical treatment that is improper and this conduct from healthcare professionals is unacceptable. I'm suing for \$10,000,000 (10 million dollars) for medical malpractice.

VI. Previous lawsuits:

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes _____ No ☒

On
these
claims

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes _____ No _____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes _____ No ☒

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes _____ No _____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 30 day of MARCH, 2016.

Signature of Plaintiff *Robert S. Selach*
Inmate Number 3491505637
Institution Address 09-09 HAZEN ST.
EAST ELMHURST, NY
11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 30 day of MARCH, 2016, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: *Robert S. Selach*

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032

Patient:Lurch,Robert

DOB:11/28/1990 Sex:M Type:LV

Visit Date:12/26/13 Visit#

Location:lifecare

Page 1 of 1

Outpatient Chart Print

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PRESCRIPTION

<u>Date and Time</u>	<u>Prescription#</u>	<u>Prescription</u>
06/20/14 07:48	RX0878017	Bactrim DS 160-800 mg Tablet 1 tab po bid x5day Qty: 10
02/24/15 07:54	RX0910636	Ibuprofen 600 mg Tablet 1 tab by mouth prn process if pain score 4 to 6 (moderate pain) Qty: 30
03/19/15 08:25	RX0946701	Bactrim DS 160-800 mg Tablet 1 tab by mouth q12h x7day Qty: 14

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 1 of 37

Outpatient Chart Print

All Events

Thu, 26Dec 0200 Basic Metabolic Panel Ca Total Serum Status: complete
Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)

Remark : Spec #30026002: 26 Dec 13 0200
Diagnosis : Unspecified psychosis
Na (mmol/L) : 144 (137 - 147)
K (mmol/L) : 3.7 (3.6 - 5.2)
Cl (mmol/L) : 109 (99 - 112)
CO2 (mmol/L) : 27 (23 - 32)
BUN (mg/dL) : 9 (6 - 22)
Creat (mg/dL) : 1.0 (0.1 - 1.4)
Glu (mg/dL) : 80 (70 - 99)
70-99 Defined by ADA to be normal
for fasting glucose
100-125 Defined by ADA to be
pre-diabetic for fasting
glucose
=or>126 on 2 occasions defined by
ADA as diabetic for
fasting glucose)
Ca (mg/dL) : 9.0 (8.0 - 10.4)
CalcOsmo(mOsm/L) : 285 (277 - 302)
Anion Gap : 8.3 (6 - 18)
eGFR AfAmer mL/min : >60 (>=60)
eGFR Other mL/min : >60 (>=60)
Hemolysis : 0

Rajanikant Kabaria (26 Dec 13 2220)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig:Chaput, France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey, Keron Laboratory,	12/26/13 21:49

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 2 of 37

Outpatient Chart Print

All Events - continued

accessioned	Lab Assistant (ESOF)	
	Sig:Sealey,Keron Laboratory,	12/26/13 21:49
documented by	Lab Assistant (ESOF)	
	Sig:Kabaria,Rajanikant	12/26/13 22:20
	Laboratory, Lab Technologist	
	(ESOF)	

Thu, 26Dec 0200 Calcium Level Total Serum Status: complete
Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : EST(30026002)

Ca (mg/dL) : 9.0 (8.0 - 10.4)
Rajanikant Kabaria (26 Dec 13 2220)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig:Chaput,France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:20

Thu, 26Dec 0200 Gamma Glutamyl Transferase Level Serum Status: complete
Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)

GGT (IU/L) : 40 (15 - 85)
Rajanikant Kabaria (26 Dec 13 2220)

Documentation History	Employee	Date/Time
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Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 3 of 37

Outpatient Chart Print
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All Events - continued

new direct entry ordered by	Sig:Chaput,France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:20

Thu, 26Dec 0200 Hepatic Function Panel Serum Status: complete
Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)

AST (U/L)	: 37	(11 - 39)
ALT (U/L)	: 21	(11 - 35)
Alk P (U/L)	: 103	(25 - 100)
T Bil (mg/dL)	: 0.3	(0.2 - 1.3)
D Bil (mg/dL)	: 0.1	(0.0 - 0.2)
T.Prot (g/dL)	: 7.7	(6.3 - 8.2)
Alb (g/dL)	: 4.5	(3.7 - 5.1)

Rajanikant Kabaria (26 Dec 13 2220)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig:Chaput,France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:20

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 4 of 37

Outpatient Chart Print

All Events - continued

verified by

Sig:Kapsopoulos,Andrew 01/04/14 00:37
Laboratory, Medical Technologist
(ESOF)

Thu, 26Dec 0200 Magnesium Level Serum

Status: complete

Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)

Mg (mEq/L) : 1.8 (1.3 - 1.9)
Rajanikant Kabaria (26 Dec 13 2220)

Documentation History

new direct entry ordered by

EmployeeDate/Time

Sig:Chaput,France, MD,
Psychiatry/Mental Health,
Attending Physician (ESOF)

12/26/13 21:11

specimen collection

Sig:Sealey,Keron Laboratory,
Lab Assistant (ESOF)

12/26/13 21:49

accessioned

Sig:Sealey,Keron Laboratory,
Lab Assistant (ESOF)

12/26/13 21:49

documented by

Sig:Kabaria,Rajanikant
Laboratory, Lab Technologist
(ESOF)

12/26/13 22:20

Thu, 26Dec 0200 Phosphate Level Serum

Status: complete

Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)

Phosphate (mg/dL) : 4.1 (2.7 - 4.5)
Rajanikant Kabaria (26 Dec 13 2220)

Documentation History

new direct entry ordered by

EmployeeDate/Time

Sig:Chaput,France, MD,
Psychiatry/Mental Health,
Attending Physician (ESOF)

12/26/13 21:11

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 5 of 37

Outpatient Chart Print

All Events - continued

specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:20

Thu, 26Dec 0200 Thyroid Stimulating Hormone Level w/rflx toStatus: complete

Collection Time	: 26 Dec 13 0200
Collected by	: Unknown
Specimen	: SST(30026002)
Remark	: Spec #30026002: 26 Dec 13 0200
Diagnosis	: Unspecified psychosis
TSH (uIU/mL)	: 0.891 (0.35 - 4.8)

John Ventrice (26 Dec 13 2229)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig:Chaput,France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:20
documented by	Sig:Ventrice,John Laboratory, Lab Medical Technician (ESOF)	12/26/13 22:29

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 6 of 37

Outpatient Chart Print

All Events - continued

Thu, 26Dec 0200 Ethyl Alcohol Level Quant, Serum Status: complete
Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)
EtOH (mg/dL) : 262 (Lower limit of detection = 10 mg/dL)
Rajanikant Kabaria (26 Dec 13 2249)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig:Chaput,France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:20
documented by	Sig:Ventrice,John Laboratory, Lab Medical Technician (ESOF)	12/26/13 22:29
documented by	Sig:Kabaria,Rajanikant Laboratory, Lab Technologist (ESOF)	12/26/13 22:49

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 7 of 37

Outpatient Chart Print

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All Events - continued

Thu, 26Dec 0200 Syphilis Treponemal Ab,IgG w/rflx to RPR/TiStatus: complete
Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : SST(30026002)
Remark : Spec #30026002: 26 Dec 13 0200
Syphilis IgG Ab : non-reactive (non-reactive)
Syph STD Comment : No Serological evidence of infection with
T.pallidum (incubating or early primary
syphilis cannot be excluded). Retest in 2-4
weeks if clinically indicated.
Maria Nogid (27 Dec 13 1311)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig:Chaput,France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
specimen collection	Sig:Sealey,Keron Laboratory, Lab Assistant (ESOF)	12/26/13 21:49
accessioned	Sig:Nogid,Maria Laboratory, Lab Technologist (ESOF)	12/27/13 13:11
documented by	Sig:Nogid,Maria Laboratory, Lab Technologist (ESOF)	12/27/13 13:11
verified by	Sig:Nogid,Maria Laboratory, Lab Technologist (ESOF)	12/27/13 13:32

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032

Patient:Lurch,Robert

DOB:11/28/1990 Sex:M Type:EP

Visit Date:12/26/13 Visit# 3598032-1

Location:emergency

Page 8 of 37

Outpatient Chart Print

=====

All Events - continued

Thu, 26Dec 0200 Hemogram Auto Diff w/rflx to Manual Diff Status: complete

Collection Time : 26 Dec 13 0200
Collected by : Unknown
Specimen : LavEDTA(30026002)

WBC($10^9/L$) : 7.1 (4.8 - 10.8)
RBC($10^{12}/L$) : 5.26 (4.70 - 6.10)
Hgb (g/dL) : 15.4 (14.0 - 18.0)
Hct (%) : 47.2 (42 - 52)
MCV (fL) : 89.7 (80 - 94)
MCH (pg) : 29.3 (27 - 31)
MCHC(g/dL) : 32.6 (32 - 36)
RDW (%) : 13.6 (12 - 15)
Plt($10^9/L$) : 194 (150 - 400)
MPV (fL) : 8.4 (7.4 - 10.4)
Neut (%) : 53.1 (44 - 70)
Lymp (%) : 38.0 (20 - 45)
Mono (%) : 8.2 (2 - 10)
Eos (%) : 0.5 (1 - 4)
Baso (%) : 0.2 (0.0 - 2.0)
Neut # : 3.7 (2.1 - 7.6)
Lymp # : 2.7 (0.9 - 4.9)
Mono # : 0.6 (0.1 - 1.0)
Eos # : 0.0 L (0.0 - 0.5)
Baso # : 0.0 (0.0 - 0.1)
Mn Diff? : manual diff not needed

Jibu Abraham

(26 Dec 13 2207)

Documentation HistoryEmployeeDate/Time

new direct entry ordered by

Sig:Chaput,France, MD,
Psychiatry/Mental Health,
Attending Physician (ESOF)

12/26/13 21:11

specimen collection

Sig:Sealey,Keron Laboratory,
Lab Assistant (ESOF)

12/26/13 21:49

accessioned

Sig:Patel,Mahendrakumar, Lab
Associate (Level A) (ESOF)

12/26/13 21:52

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 9 of 37

Outpatient Chart Print

All Events - continued

documented by Sig:Abraham,Jibu Laboratory, 12/26/13 22:07
Lab Medical Technician (ESOF)
verified by Sig:Amin,Upendra Laboratory, 12/26/13 23:00
Lab Medical Technician (ESOF)

Thu, 26Dec 2058 ED Triage Note

Status: complete

Life Saving : Complete Full Triage Note
Communication Method : Direct Communication in English
Restraints : Patient brought in to ED in handcuffs.
Mode of Arrival : city ambulance
Chief Complaint : psych eval,
Assessment : pt agitated, no medical complain
Past Medical/Surgical Hx : denies
Medications on Arrival : denies
Allergies - Medications : no known drug allergies
Allergies - Other : no known allergens
Domestic Violence : Domestic Violence: no
Psych Risk Assessment : Patient sent for Psychiatric evaluation
and/or clearance
Suicide/Homicide : Suicidal?: no Homicidal?: no 1:1: no
Destination: Adult CPEP with Escort
ED Alerts : NYPD Prisoner;
Blood Pressure : 135/96
Pulse : 65
Respirations : 18
Temperature : 96.9 F (36.1 C)
Temperature Method : Tympanic
O2 Saturation : 98 %
Suspected Infection? : no
Alteration of Mental Stat: no
Pain Screen : pt denies pain at this time
ESI Level : 4
Team Assigned : CPEP

Kazumi Inose, RN (26 Dec 13 2059)

Documentation History

Employee

Date/Time

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 10 of 37

Outpatient Chart Print

All Events - continued

documented by

Sig:Inose,Kazumi, RN Nursing, 12/26/13 20:59
Nurse - Registered (ESOF)

Thu, 26Dec 2111 Psychiatry Attending Other Note Chaput, F Status: corrected

Discipline : Attending
Author : France Chaput, MD
Note Type : Psychiatry
Contact : Direct patient contact
Preferred Language : English
Language Used : English
Note (WP) : Pt is a 23 yo BM with unknown psychiatric hx
BIB EMS after he became disruptive in a
Chinese restaurant, did not pay for his food
and started breaking things. At arrival pt is
agitated, threatening NYPD (he is not in
custody) and unable to cooperate. He was
placed in wrist and ankle restraint and was
given Haldol 5 mg IM and Ativan 2 mg IM.
France Chaput, MD (26 Dec 13 2142)

Documentation History

documented by

Employee

Date/Time

Sig:Chaput,France, MD
Psychiatry/Mental Health,
Attending Physician (ESOF)

12/26/13 21:14

corrected by

Sig:Chaput,France, MD
Psychiatry/Mental Health,
Attending Physician (ESOF)

12/26/13 21:42

Thu, 26Dec 2112 Haloperidol Lactate

Status: complete

Dose/Route : 1 mL inj intramuscu
Admin Info : 1 mL (5 mg) of Haloperidol Lactate 5 mg/mL
Injection, 1 mL
Site : deltoid

Maria D Marquez, RN (26 Dec 13 2112)

Documentation History

Employee

Date/Time

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032
Patient: Lurch, Robert
DOB: 11/28/1990 Sex: M Type: EP
Visit Date: 12/26/13 Visit# 3598032-1
Location: emergency

Page 11 of 37

Outpatient Chart Print

All Events - continued

new direct entry ordered by Sig: Chaput, France, MD, 12/26/13 21:11
Psychiatry/Mental Health,
Attending Physician (ESOF)
documented by Sig: Marquez, Maria D, RN 12/26/13 21:12
Psychiatry/Mental Health, Staff
Nurse (ESOF)

Thu, 26Dec 2112 LORazepam Status: complete
Dose/Route : 2 mg intramuscu
Admin Info : 2 mg (1 mL) of LORazepam 2 mg/mL Injection, 1
mL Carpuject
Site : deltoid
Maria D Marquez, RN (26 Dec 13 2112)

Documentation History	Employee	Date/Time
new direct entry ordered by	Sig: Chaput, France, MD, Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:11
documented by	Sig: Marquez, Maria D, RN Psychiatry/Mental Health, Staff Nurse (ESOF)	12/26/13 21:12

Thu, 26Dec 2114 Transfer to CPEP Note Status: complete
Review Prior Visit : NOTE: This triage note supplements the full
triage note completed on this patient during
the AES/CPEP visit that was just completed.
Perform chart review to review all
information from that visit.
Date & Time : Thu, 26 Dec 2013 2114
Patient's Chief Complaint: psych eval,
Team Assigned : CPEP
Maria D Marquez, RN (26 Dec 13 2114)

Documentation History	Employee	Date/Time
documented by	Sig: Marquez, Maria D, RN Psychiatry/Mental Health, Staff	12/26/13 21:14

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 12 of 37

Outpatient Chart Print

=====
All Events - continued

Nurse (ESOF)
=====

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032
Patient: Lurch, Robert
DOB: 11/28/1990 Sex: M Type: EP
Visit Date: 12/26/13 Visit#: 3598032-1
Location: emergency

Page 13 of 37

Outpatient Chart Print

=====

All Events - continued

Thu, 26Dec 2117 CPEP RN Assessment (Adult) Status: complete
Arrival Time to CPEP : Thu, 26 Dec 2013 2114
Marital Status : Unable to Obtain
Race/Ethnicity : Black or African American
Religion : unable to obtain
Source of Referral : Self, family or friend;
Language :

Preferred Language(s) : English

Reason for Visit at Triag: psych eval,
Patient's Chief Complaint: psy eval
Suicide/Self Harm : New Assmt: No new suicide assessment
documented Self Harm Indications:
Unable to assess Comment: unable to
obtain

Recent Medications : unable to obtain
Allergies Med : no known drug allergies
Allergies Other : no known allergens
Diet : regular
Substance/Alcohol Use : unable to assess
Smoking : not assessed
Past Medical History (WP): Unable to obtain
Pain Assessment : no pain issues at this time
Skin Assessment/Pressure :

Braden Scale : Score: 23 Braden Scale: No Risk Sensory
Perception: responds to verbal commands. has
no sensory deficit which would limit ability
to feel or voice pain or discomfort.
Moisture: skin is usually dry Activity:
walks frequently during waking hours
Mobility: makes position changes without
assistance Nutrition: eats most of every
meal Friction & Shear: moves in bed and in
chair independently

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032
Patient: Lurch, Robert
DOB: 11/28/1990 Sex: M Type: EP
Visit Date: 12/26/13 Visit# 3598032-1
Location: emergency

Page 14 of 37

Outpatient Chart Print

All Events - continued

Thu, 26Dec 2117 CPEP RN Assessment (Adult) -- cont'd
Skin Assessment: SKIN INTACT: Yes SKIN CONDITION DESCRIPTION: Dry
and Intact;

Pressure Ulcer : PRESSURE ULCER: no, pressure ulcer

Fall Risk

: Fall History: No history of falls within
the last (6) months Age: < 60 yrs
Secondary Diagnosis/Co-Morbidity:
None present Incontinence: No
incontinence
Urgency/Frequency/Nocturia Status:
None present Fall Risk Drugs: pt had
a sedated procedure within the past
24hrs Mobility, Transfer or
Ambulation: No assistance or
supervision needed Gait Status:
Steady gait Visual or Auditory
Impairments: Visual or Auditory
impairment do NOT affect gait Pt Care
Equipment : None present Altered
Awareness of Immediate Physical
Environment: No altered awareness
Impulsiveness: Pt impulsive
Limitations: Pt lacks understanding
of their physical and cognitive
limitations Score: 13 Risk: High Risk

Elopement Risk

: No elopement risks identified

Broset Violence Checklist: Confused: absence of behavior Irritable:
presence of behavior Boisterous:
presence of behavior Physically
Threatening: presence of behavior
Verbally threatening: presence of
behavior Attacking objects: absence
of behavior Total Score: 4 Risk
Level: imminent risk for violence

Hx of Restraint/Seclusion: yes

Thu, 26Dec 2128 Nursing Progress Note w/Care Plan (Psych) (Status: complete)
 Preferred Language(s) : English
 Communication Ability : Able to communicate
 Language Used : English
 Most Recent VS : T 96.9, P 65, R 18, BP 135, O2 Sat 98 (12/26
 20:58)
 Vascular Lines : no vascular lines

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032

Patient:Lurch,Robert

DOB:11/28/1990 Sex:M Type:EP

Visit Date:12/26/13 Visit# 3598032-1

Location:emergency

Page 16 of 37

Outpatient Chart Print

=====

All Events - continued

Thu, 26Dec 2128 Nursing Progress Note w/Care Plan (Psych) (-- cont'd
Problems : : RN : Danger to others Evidence:

severely agitated behavior,loud and
verbally abusive and not amenable
with redirection. Goals: Patient will
not be a danger to self and others
Objectives: Patient will not threaten
staff and will not attack staff in 2
hours,patient will be sfe and
comfortable when placed in
restraints,Patient will be released
as early as indicated

Nsg Prob & Intvns (WP) : Apply restraints properly
Check restraints q 15 minutes for good
circulation and skin integrity
Assess mental status and monitor for any
significant changes
Provide comfort measures such as fluids food
elimination ROM etc
Reassess patient for possibility of early
release from restraints every 15 minutes
d/c restraints as indicated meeting the
criteria for release
administer medication as ordered by MD.
Provide safe calm and supportive environment

Evaluation (WP)

Author

Progress Note (WP)

: Patient calm at this time
: Maria D Marquez, RN
: Patient was uncooperative on arrival.patient
combative and threatening staff yelling and
cursing.Patient was medicated with Ativan 2
mg IM stat and Haldol 5 mg IM stat @2110 and
wrist and ankle restraints
2110-2145.patient's vital signs taken post
medications 114/53,89 pulse rate,20
respiration 89 pulse rate,97.2 temp.,
Maria D Marquez, RN (26 Dec 13 2142)

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 17 of 37

Outpatient Chart Print

All Events - continued

Documentation History	Employee	Date/Time
documented by	Sig:Marquez,Maria D, RN Psychiatry/Mental Health, Staff Nurse (ESOF)	12/26/13 21:42

Thu, 26Dec 2133 CPEP Interim Disposition Note Status: complete

Dispo Date/Time : Thu, 26 Dec 2013 2133

Interim Disposition : Hold

Primary Diagnosis : Unspecified psychosis

Medical Necessity : Significant danger to self or others

Risks/Alerts : Violence Risk,Falls Risk

Risks/Alerts Details : fall prec,assault prec

Preliminary Treatment Pla: Close Observation (q 15 min); Watch for
signs/symptoms of withdrawal; Individual
Therapy; Group Therapy; Milieu Therapy;

Plan Detail : -place on hold; PRN meds for agitation;
assault precautions
-labs
-re-assess when pt is able to cooperate

Attending : France Chaput, MD
France Chaput, MD (26 Dec 13 2134)

Documentation History	Employee	Date/Time
documented by	Sig:Chaput,France, MD Psychiatry/Mental Health, Attending Physician (ESOF)	12/26/13 21:34

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 18 of 37

Outpatient Chart Print

All Events - continued

Thu, 26Dec 2135 Adult CPEP CAF

Status: complete

Arrival Time to CPEP : Thu, 26 Dec 2013 2114
Time Pt Seen by Physician: Thu, 26 Dec 2013 2135
Language :

Preferred Language(s) : English

Assessment Type : Full Assessment
Race/Ethnicity : Black or African American
Source of Referral : Self, family or friend;
Phone Number(s) : Unable to obtain
Source of Information : Patient
Personal Collateral Conta: none known
Professional Collateral C: none known
Chief Complaint at Triage: psych eval,
Patient's Chief Complaint: psy eval
History of Present Illnes: Pt is a 23 yo BM with unknown psychiatric hx
BIP EMS after he became disruptive in a
Chinese restaurant, did not pay for his food
and started breaking things. At arrival pt is
agitated, threatening NYPD (he is not in
custody) and unable to cooperate. He was
placed in wrist and ankle restraint and was
given Haldol 5 mg IM and Ativan 2 mg IM. He
cannot be interviewed at this time due to
sedation.
Past Psychiatric History : Unable to assess
Psych Hx Reviewed? : No existing Past Psychiatric history
documented. Unable to assess patient for
history at this time.
Psychopharm History : Unable to assess
High Risk Psych Hx : Unable to assess
AOT Status : unable to assess
Past Medical History : Unable to obtain
Allergies Med : no known drug allergies
Allergies Other : no known allergens

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 19 of 37

Outpatient Chart Print

=====

All Events - continued

Thu, 26Dec 2135 Adult CPEP CAF -- cont'd
Home Meds/Attestation :

Attestation : Unable to obtain medication list due to Patient
unable or unwilling to communicate and collateral
unavailable. Any medications on the list are
unverified.

Substance/Alcohol Use : unable to assess
Substance/Alcohol Use Hx : No existing Substance/Alcohol Use history
documented. Unable to assess patient for
history at this time.
Abuse/Trauma History : Unable to Assess
Trauma Hx Reviewed? : No existing Abuse/Trauma history documented.
Unable to assess patient for history at this
time.
ACS/ APS Involvement : unable to assess
Family History : Unable to assess
Current Residence : Unable to Assess
Social/Development Histor: unable to assess
RN Suicide Assessment : New Assmt: No new suicide assessment
documented Self Harm Indications:
Unable to assess Comment: unable to
obtain
Suicide/Self Harm : New Assmt: No new suicide assessment
documented Addtl Findings: unable to
assess Self Harm Indications: None
Pertinent RN Violence Ass: Confused: absence of behavior Irritable:
presence of behavior Boisterous:
presence of behavior Physically
Threatening: presence of behavior
Verbally threatening: presence of
behavior Attacking objects: absence
of behavior Total Score: 4 Risk
Level: imminent risk for violence
Violence Risk Factors : Agitated, Hostile, Recent violence

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 20 of 37

Outpatient Chart Print

=====

All Events - continued

Thu, 26Dec 2135 Adult CPEP CAF -- cont'd

Medical Evaluation :

General : healthy appearing, in no acute distress, well
developed, well nourished,
----- : Superior --> Inferior
----- : Surface --> Deep

Mental Status Exam :

Appearance : Appears stated age, Adequately
dressed, Disheveled
Behavior : Hostile, Agitated
Behavior (more) : now sedated and unable to participate in
interview
Speech : Unable to assess
Thought process : Unable to assess
Thought content : Unable to assess
Suicidal ideation : Unable to assess
Aggressive ideation : Violent thoughts
Aggressive ideation (more) : was threatening NYPD
Perceptual disorders : Unable to assess
Mood : Unable to assess
Affect : Increased intensity, Labile affect
Impulse control : Impaired impulse control
Cognitive function : Reduced arousal
Insight : Unable to assess
Judgment : Impaired judgment
Mental Status Exam Time : 26 Dec 13 2138

Barriers to Assessment : Patient agitated or threatening; Patient
unable;

Axis I Diagnosis : Unspecified psychosis

Axis V Diagnosis : Current GAF Score: 20.

Strengths : General good health,

Formulation : Pt is a 23 yo BM with unknown psychiatric hx

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 21 of 37

Outpatient Chart Print

All Events - continued

Thu, 26Dec 2135 Adult CPEP CAF -- cont'd

BIB EMS after he became disruptive in a Chinese restaurant, did not pay for his food and started breaking things. At arrival pt is agitated, threatening NYPD (he is not in custody) and unable to cooperate. He was placed in wrist and ankle restraint and was given Haldol 5 mg IM and Ativan 2 mg IM. He cannot be interviewed at this time due to sedation.

Diff dx include substance related d/o NOS, psychotic d/o NOS, mood d/o NOS, r/o psychotic and mood d/o due to GMC. Pt is at acute risk of harm to others given recent violence, agitation at arrival in CPEP. He will be placed on hold for safety and re-assess when he is able to cooperate.

Attending

: France Chaput, MD

France Chaput, MD (26 Dec 13 2141)

Documentation History

documented by

Employee

Sig:Chaput,France, MD
Psychiatry/Mental Health,
Attending Physician (ESOF)

Date/Time

12/26/13 21:41

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032

Patient: Lurch, Robert

DOB: 11/28/1990

Sex: M Type: EP

Visit Date: 12/26/13 Visit# 3598032-1

Location: emergency

Page 22 of 37

Outpatient Chart Print

All Events - continued

Thu, 26Dec 2146 Vital Signs IP

Status: complete

BP : 114/53 mmHg
Pulse : 89 bpm
Resp : 18 breaths/min
Resp Description : regular, unlabored
O2 Sat : n/a
Temp : 97.8 F (36.6 C)
Temp Method : tympanic membrane
Pain : no
Pain (Trend) : 0

Celso Diokno, Psych Tech

(26 Dec 13 2147)

Documentation History

documented by

Employee

Sig: Diokno, Celso, Psych Tech
Psychiatry/Mental Health,
Patient Care Technician (ESOF)

Date/Time

12/26/13 21:47

Thu, 26Dec 2253 BHC Scanned ER records

Status: complete

Scanned ER Notes : see scan result (see image #2)
Comment : acr

Alexandra Basquiat (26 Dec 13 2253)

Documentation History

documented by

Employee

Sig: Basquiat, Alexandra Medical
Records (ESOF)

Date/Time

12/26/13 22:53

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032
Patient: Lurch, Robert
DOB: 11/28/1990 Sex: M Type: EP
Visit Date: 12/26/13 Visit#: 3598032-1
Location: emergency

Page 23 of 37

Outpatient Chart Print

All Events - continued

Status: complete

Fri, 27Dec 0141 Vital Signs IP
BP : 100/59 mmHg
Pulse : 76 bpm
Resp : 18 breaths/min
Resp Description : regular, unlabored
O2 Sat : n/a
Temp : 97.7 F (36.5 C)
Temp Method : tympanic membrane
Pain : no
Pain (Trend) : 0

Lourdes Rivera, Psych Tech
(27 Dec 13 0141)

Documentation History
documented by

Employee

Date/Time

Sig: Rivera, Lourdes, Psych Tech 12/27/13 01:41
Psychiatry/Mental Health,
Psychiatric/Social Health (ESOF)

Fri, 27Dec 0449 Nursing Progress Note w/Care Plan (Psych) (Status: complete)
Preferred Language(s) : English
Communication Ability : Able to communicate
Language Used : English
Most Recent VS : T 97.7, P 76, R 18, BP 100, O2 Sat N (12/27 01:41)
Vascular Lines : No vascular lines

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032
Patient: Lurch, Robert
DOB: 11/28/1990 Sex: M Type: EP
Visit Date: 12/26/13 Visit# 3598032-1
Location: emergency

Page 24 of 37

Outpatient Chart Print

=====

All Events - continued

Fri, 27Dec 0449 Nursing Progress Note w/Care Plan (Psych) (-- cont'd
Problems : : RN : Danger to others Evidence:

severely agitated behavior, loud and
verbally abusive and not amenable
with redirection. Goals: Patient will
not be a danger to self and others
Objectives: Patient will not threaten
staff and will not attack staff in 2
hours, patient will be safe and
comfortable when placed in
restraints, Patient will be released
as early as indicated

Nsg Prob & Intervns (WP) : Apply restraints properly
Check restraints q 15 minutes for good
circulation and skin integrity
Assess mental status and monitor for any
significant changes
Provide comfort measures such as fluids food
elimination ROM etc
Reassess patient for possibility of early
release from restraints every 15 minutes
d/c restraints as indicated meeting the
criteria for release

administer medication as ordered by MD.
Provide safe calm and supportive environment
Evaluation (WP) : Patient able to sleep throughout the shift.
Will reassess mental status when awake and
when he is able to cooperate.

Author : Elma Delacruz, RN

Printed: 14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN: 3598032
Patient: Lurch, Robert
DOB: 11/28/1990 Sex: M Type: EP
Visit Date: 12/26/13 Visit#: 3598032-1
Location: emergency

Page 25 of 37

Outpatient Chart Print

All Events - continued

Fri, 27Dec 0449 Nursing Progress Note w/Care Plan (Psych) (-- cont'd
Progress Note (WP) : Patient has been asleep since 2145 after he
was released from wrist and ankle restraint,
In no apparent distress w/ spontaneous
breathing pattern. Vital signs checked and
monitored closely, wnl. Blood was drawn and
EKG was done. Patient was placed on hold for
reevaluation in the morning. Will continue to
observe and provide safe and supportive
environment.

Elma Delacruz, RN (27 Dec 13 0454)

Documentation History
documented by

Employee
Sig: Delacruz, Elma, RN
Psychiatry/Mental Health, Staff
Nurse (ESOF)

Date/Time
12/27/13 04:54

Fri, 27Dec 0606 Vital Signs IP

Status: complete

BP : 105/66 mmHg
Pulse : 82 bpm
Resp : 18 breaths/min
O2 Sat : n/a
Temp : 96.9 F (36.1 C)
Pain : no
Pain (Trend) : 0

Syrleene Weekes, NA (27 Dec 13 0607)

Documentation History
documented by

Employee
Sig: Weekes, Syrlene, NA
Psychiatry/Mental Health,
Nurse's Aide (ESOF)

Date/Time
12/27/13 06:07

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 26 of 37

Outpatient Chart Print

=====

All Events - continued

Fri, 27Dec 0938 Vital Signs IP

Status: complete

BP : 123/66 mmHg
Pulse : 64 bpm
Resp : 18 breaths/min
Resp Description : regular, unlabored
O2 Sat : n/a
Temp : 97.1 F (36.2 C)
Temp Method : tympanic membrane
Pain : no
Pain (Trend) : 0

Celso Diokno, Psych Tech
(27 Dec 13 0938)

Documentation HistoryEmployeeDate/Time

documented by

Sig:Diokno,Celso, Psych Tech

12/27/13 09:38

Psychiatry/Mental Health,

Patient Care Technician (ESOF)

summary result review

Sig:Baptiste,Katiuscha, RN

12/27/13 10:08

Psychiatry/Mental Health, Nurse

- Registered (ESOF)

Fri, 27Dec 1008 Nursing Progress Note w/Care Plan (Psych) (Status: complete)

Preferred Language(s) : English
Communication Ability : Able to communicate
Language Used : English
Vascular Lines : no vascular lines

Printed:14 Aug 15 1044:59

Bellevue Hospital Center
462 First Avenue
New York, NY 10016

MRN:3598032
Patient:Lurch,Robert
DOB:11/28/1990 Sex:M Type:EP
Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 27 of 37

Outpatient Chart Print

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All Events - continued

Fri, 27Dec 1008 Nursing Progress Note w/Care Plan (Psych) (-- cont'd
Problems : : RN : Danger to others Evidence:

severely agitated behavior,loud and
verbally abusive and not amenable
with redirection. Goals: Patient will
not be a danger to self and others
Objectives: Patient will not threaten
staff and will not attack staff in 2
hours,patient will be sfe and
comfortable when placed in
restraints,Patient will be released
as early as indicated

Nsg Prob & Intervns (WP) : Apply restraints properly
Check restraints q 15 minutes for good
circulation and skin integrity
Assess mental status and monitor for any
significant changes
Provide comfort measures such as fluids food
elimination ROM etc
Reassess patient for possibility of early
release from restraints every 15 minutes
d/c restraints as indicated meeting the
criteria for release
administer medication as ordered by MD.
Provide safe calm and supportive environment
Evaluation (WP) : Patient was not a danger to self or others
Author : Katuscha Baptiste, RN

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Location: emergency

Page 28 of 37

Outpatient Chart Print

All Events - continued

Fri, 27Dec 1008 Nursing Progress Note w/Care Plan (Psych) (-- cont'd
Progress Note (WP) : Patient receive alert and responsive to all
stimuli, resting in OB1 on stretcher easily
aroused. No apparent distress noted. Voice no
pain and no discomfort at present time. Mood
is calm and cooperative. appetite is good and
tolerated 85% of his meal. Insight and
judgment is limited. denies
suicidal/homicidal ideation and denies A/V
hallucination. Supportive and therapeutic
milieu maintained. Safety maintained

Patient was seen and re-evaluated by MD for
T&R. Discharge instructions provided and
verbalize understanding. Refused social work
services. Personal belonging and property
given and received. Patient left unit in
stable condition.

Katiuscha Baptiste, RN
(27 Dec 13 1145)

Documentation History	Employee	Date/Time
documented by	Sig: Baptiste, Katiuscha, RN Psychiatry/Mental Health, Nurse - Registered (ESOF)	12/27/13 10:39
documented by	Sig: Baptiste, Katiuscha, RN Psychiatry/Mental Health, Nurse - Registered (ESOF)	12/27/13 11:45

Fri, 27Dec 1140 CPEP Patient Exit WB Note Status: complete
Note Type : CPEP Pt Exit
Time of Exit/Re-Entry : Fri, 27 Dec 2013 1140
Documented By : Katiuscha Baptiste, RN
Katiuscha Baptiste, RN
(27 Dec 13 1148)

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Visit Date:12/26/13 Visit# 3598032-1
Location:emergency

Page 29 of 37

Outpatient Chart Print

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All Events - continued

Documentation History	Employee	Date/Time
documented by	Sig:Baptiste,Katiuscha, RN Psychiatry/Mental Health, Nurse - Registered (ESOF)	12/27/13 11:48

Fri, 27Dec 1140 CPEP Patient Exit WB Note Status: complete
Note Type : CPEP Pt Exit
Time of Exit/Re-Entry : Fri, 27 Dec 2013 1140
Documented By : Katiuscha Baptiste, RN
Katiuscha Baptiste, RN
(27 Dec 13 1149)

Documentation History	Employee	Date/Time
documented by	Sig:Baptiste,Katiuscha, RN Psychiatry/Mental Health, Nurse - Registered (ESOF)	12/27/13 11:49

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Location:emergency

Page 30 of 37

Outpatient Chart Print

All Events - continued

Fri, 27Dec 1200 CPEP Disposition Note Status: complete
Dispo Date/Time : Fri, 27 Dec 2013 1200
Disposition : Discharge/Release
Primary Diagnosis : Adjustment disorder with disturbance of
conduct
Hospital Course (WP) : Patient seen, chart reviewed. VSS. ETOH =
262. All other labs wnl. No urine provided.

Patient requests to leave. He states he was getting Chinese food and they did not give him the right change so he was demanding his change as he is very concerned for his financial situation recently. Next he states the police showed up and he refused to leave but he knew they didn't have any reason to arrest him and they brought him to CPEP. He states he was agitated here because the cuffs were too tight but minimizes the extent of it. He also endorsed drinking 1 bottle of liquor yesterday for a friend's birthday but denied any other substances. He denies daily alcohol. He states that his left hand still feels numb but declined medical attention stating that in his experience it usually goes away in a few days.

PPH: H/o hospitalizations and ED visits for anger issues but states he has since learned how to better control his anger; multiple arrests and incarcerations including robbery and crack sale, no felonies, frequent fights

PMH: s/p 2 stab wounds, 1 in R neck and 1 in L wrist which cause pain intermittently
All: states Haldol leads to trouble breathing

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Page 31 of 37

Outpatient Chart Print

=====

All Events - continued

Fri, 27 Dec 1200 CPEP Disposition Note -- cont'd
but notably no reaction occurred last night

MEDS: none

SH: B/R NYC. Some family in the south. Never worked. Has food stamps but no other benefits. Considering applying to CUNY for web design. Lives with friends.

MSE: adequately groomed young man with hair half in braids, good ec, cooperative and pleasant, speech nl rrv, no pma/r, mood: euthymic affect: reactive, tp: linear tc: no ah vh, no si hi, i/j: good/good

I: ETOH intoxication
II: def
III: s/p stabbings
IV: unemployed
V: 55

Chronic risk factors for dangerousness to self and others including substance abuse, prior arrests, prior hospitalizations and violence. AT this time patient is calm and in control, denies SI and HI, is not intoxicated nor in withdrawal and is future oriented. He will be released. He refused SW referrals but was advised that he could apply for Medicaid on his way out.

Discharge Plan : Refused referrals
SW Assessment/Plan : n/a, refused
Discharge Instructions (P: Refused referrals, return to walk in clinic if you would like psychiatric services
Discharge Instructions La: English

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Page 32 of 37

=====

Outpatient Chart Print

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All Events - continued

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Fri, 27Dec 1200 CPEP Disposition Note -- cont'd

Discharge Prescriptions : none
Risks/Alerts : Violence Risk,Falls Risk
Risks/Alerts Details : fall prec,assault prec
Aftercare : none
Attending : Jennifer Halper, MD

Jennifer Halper, MD (27 Dec 13 1740)

Documentation History

documented by

Employee

Sig:Halper,Jennifer, MD
Psychiatry/Mental Health,
Attending Physician (ESOF)

Date/Time

12/27/13 17:40

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Visit Date:12/26/13 Visit# 3598032-1
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Page 33 of 37

Outpatient Chart Print

ORDERS

All Orders

Haloperidol Lactate

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf

Process Type : order
Dose/Route : 5 mg inj intramuscu
When : Thursday, 26 December 2013 2111 STAT

Syphilis Treponemal Ab,IgG w/rflx to RPR/Titer/TPPA Conf.

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf

When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Diagnosis : Unspecified psychosis
Print Order Form? : no
Att MD/NP/CNW : France Chaput, MD

Ethyl Alcohol Level Quant, Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf

When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Print Order Form? : no

Printed:14 Aug 15 1044:59

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Page 34 of 37

Outpatient Chart Print

ORDERS - continued

All Orders - continued

LORazepam

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf
Process Type : order
Dose/Route : 2 mg intramuscu
When : Thursday, 26 December 2013 2111 STAT

Basic Metabolic Panel Ca Total Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf
When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Diagnosis : Unspecified psychosis
Print Order Form? : no
Att MD/NP/CNW : France Chaput, MD

Calcium Level Total Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf
When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Print Order Form? : no

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Page 35 of 37

Outpatient Chart Print

=====

ORDERS - continued

All Orders - continued

Gamma Glutamyl Transferase Level Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf

When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Print Order Form? : no

Hemogram Auto Diff w/rflx to Manual Diff

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf

When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - EDTA Lavender
Print Order Form? : no

Hepatic Function Panel Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf

When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Print Order Form? : no

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Page 36 of 37

Outpatient Chart Print

ORDERS - continued

All Orders - continued

Magnesium Level Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf
When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Print Order Form? : no

Phosphate Level Serum

Ordered by : Sig:Chaput, France Psychiatry/Mental Health, Attending P
Order Date/Time : 26 Dec 13 2111:00
Reviewed by : Sig:Marquez, Maria D, RN Psychiatry/Mental Health, Staf
When : Thursday, 26 December 2013 2111 STAT
Specimen : Blood - Serum (SST)
Print Order Form? : no

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Page 37 of 37

Outpatient Chart Print

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PROBLEM LIST

<u>Problem</u>	<u>On Set</u>	<u>Stop</u>	<u>Status</u>
Unspecified psychosis	12/26/13		active
Adjustment disorder with disturbance of conduct	12/27/13		active

2016 APR -5 AM 9:54

United States District Court
Southern District of New York
Pro Se Intake Unit
500 Pearl Street
New York, NY 10007

